

STATE OF SOUTH CAROLINA DEPARTMENT OF CONSUMER AFFAIRS

Mailing Address P.O. Box 5757 Columbia, SC 29250-5757 HIGH COST LOAN CHECKLIST

S.C. Code Ann. § 37-23-10 et seq. (Supp. 2004)

www.scconsumer.gov

803-734-4236/800-922-1594

Street Address 3600 Forest Drive, 3rd Floor Columbia, SC 29204-4006

	Mortgage Broker/Lender	Borrower
Nam Addr	ess:	Address:
		City, State Zip:
	BORR	CHECKLIST OWER'S INDIVIDUAL CIRCUMSTANCES
1.	Purpose of loan	2. Borrower's credit history
3.		4. Amount of equity in home
5.	Borrower's ability to repay	6. Did the borrower shop or compare rates and terms with other lenders?
7.	Explain: Right to cancel within three days in refinancing transactions only	8. Credit Score
		LOAN TERMS
9.	Amount of Loan	10. Interest rate or APR
11.	Whether fixed or variable rate	12. Term (duration) of loan
13.	Monthly payment amount (including whether this amount is subject to change)	14. a. Real Estate
15.	Lien position of loan (1st, 2nd, etc)	16. Is this loan a refinance?
		LOAN FEES
16.	Loan origination fee	17. Discount points
18.	Commitment fee	19. Broker compensation – ALL broker compensation including yield spread premium
20.	Loan application fee	21. Other lender fee
		PROHIBITED TERMS:
A high-cost home loan cannot contain the following terms:		
22	on loans of \$150,000 or less	23. Credit insurance—can not be financed
24	. Balloon payment	25. If refinancing with the same lender, points and fees cannot be charged
26	 If financing or refinancing with a different lender, points or fees over 2.5% cannot be financed 	27. If refinancing an already high cost loan with same lender, points or fees cannot be charged
other		s, it may violate the South Carolina High Cost and Consumer Home Loan Act. (There are isted above.) You should notify the borrower, the lender and the S.C. Department of egal.
MANDATORY COUNSELING CERTIFICATION		
	a South Carolina State Housing Finance and De e advisability of this loan transaction and its ap	velopment Authority approved counselor and certify that counseling has been provided propriateness for the borrower.
Siana	ature of Counselor	Date
Address:		Phone No.